

REMARKS

Claims 1 – 17 remain pending in this application, with claims 1 and 14 being amended by this response. Claims 1 and 14 have been amended to clarify the attribute and its purpose. Support for these amendments can be found throughout the specification and more specifically from Page 8, line 34 to Page 9, line 18. Thus, it is respectfully submitted that no new matter has been added.

Rejection of Claims 1-9, 14 and 15 under 35 USC § 102(e)

Claims 1-9, 14 and 15 are rejected under 35 USC § 102(e) as being anticipated by Jacobus et al. (U.S. Pub. 2005/0209891)

The present invention describes an apparatus and method for displaying medical information derived from a plurality of sources. The apparatus includes a communication processor for acquiring medical parameters associated with a patient including patient laboratory test results. A processor collates acquired medical parameters for storage in a database and allocates visual attributes to the acquired medical parameters for identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit. A device searches the database of acquired medical parameters to find specific laboratory test results based on one or more of (a) a text string identifying a portion of a lab test name, (b) a patient identifier, and (c) a date, for displaying the acquired medical parameters and allocated visual attributes in a desired order. Claims 1 and 14 include similar features.

The present claimed invention is concerned with enabling “a care giver to easily access, view, or determine the results of multiple medical test or other data associated with the patient” (Page 2, lines 4-6). Accordingly, the present claimed invention allocates an attribute “to distinguish newly acquired or non-reviewed laboratory test results from older laboratory tests that a user has previously acknowledged...Additional medical information associated

with patients [are]...display[ed] in a composite window [, such as]...a particular care unit”

(Page 3, lines 3-14). More specifically, “lab results field 470 provides an indication of whether any lab results have been collected by the system for a particular patient and allocates an attribute to distinguish newly acquired lab results that have not yet been reviewed by a user” (Page 15, lines 21-24).

Jacobus describe a system wherein medical records, clinical observations and medical imagery are organized and aggregated into a common database, enabling the data to be viewed and updated (See abstract). Specifically, data can be uploaded or updated by users or instruments. If updated by instruments, a Clinical Observation and Analysis System (COA) is used to collect and format the data ([0051]). Additionally, Jacobus provides that proprietary data may be decoded and encrypted for transfer over public carriers and decrypted for later storage thereof.

The Office Action asserts that Jacobus disclose allocating an attribute identifying newly acquired lab results or patients associated with a particular care unit, as Jacobus briefly mentions organizing and aggregating user uploaded data into the common database. The applicant respectfully disagrees. However, Jacobus provides that when the database is updated by instruments, the uploaded data is organized and aggregated by the COA system ([0053]). When updated in the clinical interface, various summary reports are created to keep track of online data stored in the system as necessary for proper management ([0057]). However, both methods of organization and aggregation of uploaded data described by Jacobus do not disclose the principles of the present claimed invention. Specifically, both methods do not disclose “allocating visual attributes to the acquired medical parameters” for identifying newly acquired test results or the care unit that is associated with the patent. Also, both methods described by Jacobus neither disclose nor suggest disclose searching the database to find specific lab results “for display the acquired medical parameters and allocated visual attributes” as in the claimed arrangement.

Additionally, Jacobus et al describe that physicians can be notified of new patient data by email, phone, fax, pager or US mail ([0203-0209]). However, this is wholly unlike the present claimed invention, which allocates visual attributes to acquired medical parameters to identify either new lab results or the patient care unit. Specifically, the notification described by Jacobus is not a visual attribute. Even if one were to consider the notification described by Jacobus a visual attribute, the attribute is not allocated to the acquired medical parameters as in the present claimed invention. Rather, the visual attribute is sent out alone via the specified medium. Furthermore, the notification described by Jacobus is sent directly to the physician using the specified medium. This is wholly unlike the present claimed invention, which allocates visual attributes for display. Highlighting new medical results to a physician is of substantial value since it may indicate an emergency medical problem requiring immediate intervention. This advantage and the problem it addresses is not recognized or contemplated in Jacobus. Therefore, it is respectfully submitted that Jacobus neither disclose nor suggest “a processor for collating acquired medical parameters for storage in a database and **allocating visual attributes to the acquired medical parameters** for identifying at least one of (i) newly acquired laboratory test results and (ii) patients associated with a particular care unit” as recited in claims 1 and 14 of the present claimed invention.

Therefore, as Jacobus provides no 35 USC 112 compliant enabling disclosure of each feature of claims 1 and 14, it is respectfully submitted that Jacobus does not anticipate the present invention as claimed in claims 1 and 14. As claims 2-9, 15 and 18-21 are dependent on independent claim 1 and 14, it is respectfully submitted that claims 2-9, 15 and 18-21 are patentable for the same reasons as discussed above in regards to claims 1 and 14. Consequently, it is respectfully requested that the rejection of claims 1-9, 14, 15 and 18-21 under 35 USC 102(e) be withdrawn.

Rejection of Claims 10 – 13, 16 and 17 under 35 USC § 103(a)

Claims 10 – 13, 16 and 17 are rejected under 35 USC § 103(a) as being unpatentable over Jacobus et al. (U.S. Pub. 2005/0209891) in view of Cairnes (U.S. 6,139,494).

Cairnes discloses a medical diagnosis system that provides outpatient healthcare delivery and information to users. Symptom data is received and analyzed according to case management rules. Cairnes further generates patient information and develops a therapeutic program that is selectively updateable. However, Cairnes, similarly to Jacobus et al., neither discloses nor suggest “a processor for collating acquired medical parameters for storage in a database and allocating visual attributes to the acquired medical parameters for identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit” as recited in claims 1 and 14 of the present claimed invention. Accordingly, Cairnes neither discloses nor suggests “a device for searching said database of acquired medical parameters to find specific laboratory test results based on one or more of (a) a text string identifying a portion of a laboratory test name, (b) a patient identifier, and (c) a date, for display of the acquired medical parameters and allocated visual attributes in a desired order” as recited in claims 1 and 14 of the present claimed invention.

Applicant respectfully submits that there is no motivation to combine the system disclosed by Jacobus with the system disclosed by Cairnes. Specifically, Jacobus merely discloses a medical data aggregation system that centralizes patient information and allows for easy access of this information (see Jacobus, para. [0018]). Contrary to both Jacobus and the claimed invention, Cairnes describes a system for providing outpatient care that provides an outpatient with a therapeutic program based on predetermined management rules. The treatment program described in Cairnes is produced by data obtained and analyzed by the system according to these management rules to produce a treatment program. Jacobus merely aggregates the data and provides access to the data over the

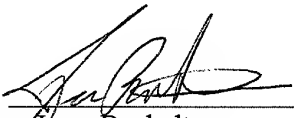
Internet. Therefore, these systems are intended to accomplish entirely unrelated objectives and provide no common problem recognition. Furthermore, contrary to Jacobus alone or in combination with Cairnes, the present claimed invention is a system which provides “a faster, more effective and user friendly means for accessing, correlating and displaying patient medical information derived from a plurality of sources (see Application, page 1 lines 31 – 34). Neither Jacobus nor Cairnes, alone or in combination, provide 35 USC 112 compliant enabling disclosure the system of the present claimed invention.

The Office Action asserts that the combination of the system of Jacobus and Cairnes discloses the principles of the present claimed invention. However, it is respectfully submitted that the combination, similarly to the individual systems of Jacobus et al. and Cairned, neither discloses nor suggests “a processor for collating acquired medical parameters for storage in a database and allocating visual attributes to the acquired medical parameters for identifying at least one of (a) newly acquired laboratory test results and (b) patients associated with a particular care unit” as recited in claims 1 and 14 of the present claimed invention. Accordingly, it is respectfully submitted that the combination, similarly to the individual systems of Jacobus et al. and Cairned, neither discloses nor suggests “a device for searching said database of acquired medical parameters to find specific laboratory test results based on one or more of (a) a text string identifying a portion of a laboratory test name, (b) a patient identifier, and (c) a date, for display of the acquired medical parameters and allocated visual attributes in a desired order” as recited in claims 1 and 14 of the present claimed invention. As claims 10 – 13, 16 and 17 are dependant on independent claims 1 and 14, it is respectfully submitted that claims 10 – 13, 16 and 17 are patentable for the same reasons as discussed above in regards to claims 1 and 14. Thus, it is respectfully submitted that this rejection is satisfied and should be withdrawn.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

No additional fee is believed due. However, if a fee is due, please charge the additional fee to Deposit Account 50-2828.

Respectfully submitted,
Mark Penny et al.

By: 
Jesse Bucholtz
Reg. No. 55,027

Jack Schwartz & Associates
1350 Broadway, Suite 1510
New York, New York 10018
Tel. No. (212) 971-0416
Fax No. (212) 971-0417
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